PHA Plans

Version

Streamlined 5-Year/Annual

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226 (exp 05/31/2006)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief to certain PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined 5-Year Plan for Fiscal Years 2005 - 2009 Streamlined Annual Plan for Fiscal Year 2005

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.

Streamlined Five-Year PHA Plan

Agency Identification

PHA Name: Northeast Oregon Housing Authority

PHA I	Number: OR032					
PHA :	Fiscal Year Beginning: (mi	m/yyyy)	04/2005			
	rograms Administered:					
🛭 Pul	olic Housing and Section 8	Se	ection 8 Only	Pu	blic Housing Onl	y
Number	of public housing units:		er of S8 units:		r of public housing units	
	r of S8 units:					
$\Box PH$	A Consortia: (check box if	submittin	g a joint PHA Plan	and con	mplete table)	
	Participating PHAs	PHA Code	Program(s) Inclute the Consortium		Programs Not in the Consortium	# of Units Each Program
Particip	pating PHA 1:					
Particip	pating PHA 2:					
Particip	pating PHA 3:					
Displa	Main administrative office PHA development manage PHA local offices Ay Locations For PHA Plan HA Plans and attachments (i	of the Parent off	HA fices upporting Doc u	ıments		
apply)	Main administrative office PHA development manage PHA local offices Main administrative office Main administrative office Main administrative office Public library PHA website Other (list below)	of the lo	fices ocal government county governme			
PHA I	Plan Supporting Documents Main business office of the PHA development manage Other (list below)	e PHA	-	on at: (select all that appl	y)

Streamlined Five-Year PHA Plan PHA FISCAL YEARS 2005 - 2009

[24 CFR Part 903.12]

A.	Mission
	e PHA's mission for serving the needs of low-income, very low income, and extremely low-income families
in the I	HA's jurisdiction. (select one of the choices below)
	The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
d	The PHA's mission is: (state mission here) The Core Purpose of Northeast Oregon Housing Authority is to provide safe, decent, sanitary, and affordable housing to the low income of Northeast Oregon. The Core Values of Northeast Oregon Housing Authority are: To provide housing for the elderly and disabled To encourage Family Self Sufficiency To provide home ownership opportunities To work with other agencies to support Welfare to Work families by providing Housing Vouchers
В.	Goals
The go in rece objecti ENCO OBJEC number right of	Is and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized at legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or es. Whether selecting the HUD-suggested objectives or their own, PHAs ARE STRONGLY WRAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR TIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measures would include targets such as: s of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the or below the stated objectives. Strategic Goal: Increase the availability of decent, safe, and affordable housing.
ø	PHA Goal: Expand the supply of assisted housing
	Objectives:
	d Apply for additional rental vouchers:
	Reduce public housing vacancies:
	Leverage private or other public funds to create additional housing opportunities:
	Acquire or build units or developments Other (list below)
ø	PHA Goal: Improve the quality of assisted housing
	Objectives:
	Improve public housing management: (PHAS score)
	Improve voucher management: (SEMAP score)
	Increase customer satisfaction:
(lis	Concentrate on efforts to improve specific management functions: ; e.g., public housing finance; voucher unit inspections)

	ø	Renovate or modernize public housing units:		
		Demolish or dispose of obsolete public housing:		
		Provide replacement public housing:		
		Provide replacement vouchers:		
		Other: (list below)		
ø	PHA C	Goal: Increase assisted housing choices		
	d	Provide voucher mobility counseling:		
	ø	Conduct outreach efforts to potential voucher landlords		
		Increase voucher payment standards		
	d	Implement voucher homeownership program:		
	ø	Implement public housing or other homeownership programs:		
		Implement public housing site-based waiting lists:		
		Convert public housing to vouchers:		
		Other: (list below)		
	Q .			
	Ū	ic Goal: Improve community quality of life and economic vitality		
ø	PHA Goal: Provide an improved living environment Objectives:			
	ø	Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:		
	ø	Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:		
	ø	Implement public housing security improvements:		
		Designate developments or buildings for particular resident groups (elderly,		
		persons with disabilities)		
		Other: (list below)		
HUD St	rategic G	Goal: Promote self-sufficiency and asset development of families and individuals		
d	_	Goal: Promote self-sufficiency and asset development of assisted households		
	Object	· · · · · · · · · · · · · · · · · · ·		
	ø	Increase the number and percentage of employed persons in assisted families:		
	ø	Provide or attract supportive services to improve assistance recipients'		
	-	employability:		
	ø	Provide or attract supportive services to increase independence for the elderly or		
		families with disabilities.		
		Other: (list below)		

HUD	Strateg	ic Goal: Ensure Equal Opportunity in Housing for all Americans			
g	PHA Goal: Ensure equal opportunity and affirmatively further fair housing				
	Objecti	ives:			
	d	Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:			
	e	Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:			
	ø	Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:			
		Other: (list below)			
Other PHA Goals and Objectives: (list below)					

- Develop a plan to acquire \$1.00 HUD Homes for Sale
- Review Resident Advisory Board Suggestions
- Look at outside the normal housing needs
- Look at housing for persons being released from correction facilities and persons completing drug and alcohol rehabilitation
- Homeownership using Existing Housing
- Participate in developing a tenant training program

Streamlined Annual PHA Plan PHA Fiscal Year 2004

Table of Contents

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

A. ANNUAL STREAMLINED PHA PLAN COMPONENTS

ø	1.	Housing Needs
ø	2.	Financial Resources
ø	3.	Policies on Eligibility, Selection and Admissions
ø	4.	Rent Determination Policies
ø	5	Capital Improvements Needs
$\ddot{\sqcap}$		Demolition and Disposition
4		Homeownership
		-
•		Civil Rights Certifications (included with PHA Certifications of Compliance)
		Additional Information
a. b.		rogress on Meeting 5-Year Mission and Goals of for Substantial Deviations and Significant Amendments
c.		nformation Requested by HUD
		i. Resident Advisory Board Membership and Consultation Process
		ii. Resident Membership on the PHA Governing Board
		iii. PHA Statement of Consistency with Consolidated Plan
	1.0	iv. (Reserved)
		. Project-Based Voucher Program
		. Supporting Documents Available for Review
		. FY 20 Capital Fund Program and Capital Fund Program Replacement Housing
	Fa	ctor, Annual Statement/Performance and Evaluation Report
ø	13	. Capital Fund Program 5-Year Action Plan
ø	14	. Other (List below, providing name for each item)
		tachments
		2005 PHA Plan Capital Fund Program Annual Statement - Part I
		Capital Fund Program - Part II
		Capital Fund Program - Part III 2004 Annual Statement/Performance and Evaluation Report
		2003 Annual Statement/Performance and Evaluation Report
		5 Year Action Plan for Capital Fund
		Section 8 Homeownership Program Capacity Statement
		Progress Made In Meeting Missions and Goals
		List of Resident Advisory Board
		Public Housing Deconcentration Policy
		Agency Plan Amendment or Modification Policy Voluntary Conversion Policy
		Resident Survey Follow-up Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;

Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.

For PHAs APPLYING FOR CAPITAL FUND PROGRAM (CFP) GRANTS:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions;

Form SF-LLL & SF-LLLa, Disclosure of Lobbying Activities.

Executive Summary (optional)

- 1) Northeast Oregon Housing Authority achieved the PHAS high performer designation.
- Northeast Oregon Housing Authority has received a FY 2002 Public Housing DETAP Grant in the amount of \$15,000. The DETAP funds are addressing Drug and Alcohol issues for Public Housing residents in Grant County.
- 3) Northeast Oregon Housing Authority is operating a Section 8 Housing Choice Voucher Homeownership Program.

[903.7®]. If desired, provide a brief overview of the contents of the streamlined 5-Year/Annual Plan.

1. Statement of Housing Needs [24 CFR Part 903.12 (b), 903.7(a)]

A. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the PHA's Waiting Lists				
Waiting list type: (select one)				
Section 8 tenant-based a	assistance			
Public Housing				
Combined Section 8 and	d Public Housing			
Public Housing Site-Ba	sed or sub-jurisdiction	al waiting list (optional)		
If used, identify which	h development/subjuri			
	# of families	% of total families	Annual Turnover	
Waiting list total	181		47	
Extremely low income	140	77%		
<=30% AMI				
Very low income	32	18%		
(>30% but <=50% AMI)				
Low income	9	5%		
(>50% but <80% AMI)	0.4			
Families with children	91	50%		
Elderly families	24	13%		
Families with Disabilities	61	34%		
Race/ethnicity 1	172	95%		
Race/ethnicity 2	3	2%		
Race/ethnicity 3	6	3%		
Race/ethnicity 4	0	0%		
Characteristics by Bedroom				

Hous	sing Needs of Families	s on the PHA's Waiting L	ists			
Size (Public Housing Only)						
1BR	90	50	10			
2 BR	53	29	13			
3 BR	36	20	20			
4 BR	2	1	4			
5 BR						
5+ BR						
Is the waiting list closed (select one)? No Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? No Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes						
House	sing Needs of Families	s on the PHA's Waiting I	ists			
Waiting list type: (select one)	or i minime	, on vite a and b fruiting i				
	d Public Housing	al waiting list (optional)				
	# of families	% of total families	Annual Turnover			
Waiting list total	391		118			
Extremely low income <=30% AMI	288	74%				
Very low income (>30% but <=50% AMI)	92	23%				
Low income (>50% but <80% AMI)	11	3%				
Families with children	138	35%				
Elderly families	34	9%				
Families with Disabilities	78	20%				
Race/ethnicity 1	374	95%				
Race/ethnicity 2	6	2%				
Race/ethnicity 3	7	2%				
Race/ethnicity 4	4					
race/eumicity 4	4	1%				
Characteristics by Bedroom Size (Public Housing Only) 1BR 2 BR						
3 BR						
3 BR						

	Housing Needs of Families on the PHA's Waiting Lists
In the	waiting list closed (select one)? No Yes
If yes:	How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? No Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes
В.	Strategy for Addressing Needs Provide a brief description of the PHA's strategy for addressing the housing needs of families on the PHA's public housing and Section 8 waiting lists IN THE UPCOMING YEAR , and the Agency's reasons for choosing this strategy.
Need Strateg	trategies description: descript
ø	Employ effective maintenance and management policies to minimize the number of public housing units off-line
ø	Reduce turnover time for vacated public housing units
ø	Reduce time to renovate public housing units Seek replacement of public housing units lost to the inventory through mixed finance development
	Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
ø	Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
ø	Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
ø	Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
ø	Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
q	Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
	Other (list below)
	Strategy 2: Increase the number of affordable housing units by: Select all that apply
ø	Apply for additional section 8 units should they become available
ø	Leverage affordable housing resources in the community through the creation of mixed - finance housing
ø	Pursue housing resources other than public housing or Section 8 tenant-based assistance.
	Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

e	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
	Exceed HUD federal targeting requirements for families at or below 30% of AMI in
	tenant-based section 8 assistance Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (list below)
	: Specific Family Types: Families at or below 50% of median egy 1: Target available assistance to families at or below 50% of AMI Select all that apply
	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below)
	Specific Family Types: The Elderly egy 1: Target available assistance to the elderly: Select all that apply
	Seek designation of public housing for the elderly
ø	Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below)
	Specific Family Types: Families with Disabilities egy 1: Target available assistance to Families with Disabilities: Select all that apply
	Seek designation of public housing for families with disabilities
	Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
ø	Apply for special-purpose vouchers targeted to families with disabilities, should they become available
	Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below)
	Specific Family Types: Races or ethnicities with disproportionate housing needs y 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate
Select ij	fapplicable
6	Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing Select all that apply

	11 7
ø	Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
4	Market the section 8 program to owners outside of areas of poverty/minority concentrations
	Other: (list below)
(2)	Housing Needs & Strategies: (list needs and strategies below) Reasons for Selecting Strategies
Of the fo	nctors listed below, select all that influenced the PHA's selection of the strategies it will pursue: Funding constraints
4	Staffing constraints Limited availability of sites for assisted housing
d	Extent to which particular housing needs are met by other organizations in the community
ø	Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
	Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government
4	Results of consultation with residents and the Resident Advisory Board Results of consultation with advocacy groups
ø	Other: (list below) Resident Advisory Board identified housing for released convicts and drug and alcohol treatment persons as having unmet housing needs

2. Statement of Financial Resources

[24 CFR Part 903.12 (b), 903.7 (c)]

List on the following table the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses				
Sources Planned \$ Planned Uses				
1. Federal Grants (FY 2004 grants)				
a) Public Housing Operating Fund	386,533			
b) Public Housing Capital Fund	112,668			
c) HOPE VI Revitalization				
d) HOPE VI Demolition				

Financial Resources: Planned Sources and Uses					
Sources					
e) Annual Contributions for Section 8 Tenant-	3,262,691				
Based Assistance					
f) Resident Opportunity and Self-Sufficiency	78,903				
Grants					
g) Community Development Block Grant					
h) HOME					
Other Federal Grants (list below)					
2. Prior Year Federal Grants (unobligated					
funds only) (list below)					
3. Public Housing Dwelling Rental Income	154,020				
4. Other income (list below)					
Interest	1,893				
Other	20,871				
4. Non-federal sources (list below)					
Total resources	4,017,579				

3. PHA Policies Governing Eligibility, Selection, and Admissions [24 CFR Part 903.12 (b), 903.7 (b)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

1	a. When does the PHA verify eligibility for admission to public housing? (select all that apply)
ø	When families are within a certain number of being offered a unit: (three (3))
	When families are within a certain time of being offered a unit: (state time)
	Other: (describe)
	b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?
ø	Criminal or Drug-related activity
ø	Rental history
ø	Housekeeping
	Other (describe)

	c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
	d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
	e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes (either directly or through an NCIC-authorized source)
(2) W	Waiting List Organization
a.	Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply) Community-wide list
9	Sub-jurisdictional lists Site-based waiting lists Other (describe)
o.	Where may interested persons apply for admission to public housing? PHA main administrative office PHA development site management office
y	Other (list below) 1) by mail 2) application forms available at social services offices 3) application forms available at apartments offices

c. Site-Based Waiting Lists-Previous Year

a. Has the PHA operated one or more site-based waiting lists in the previous year? **No** If yes, complete the following table; if not skip to d.

		Site-Based Waiting Li	sts	
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics

^{2.} What is the number of site based waiting list developments to which families may apply at one time?

^{3.} How many unit offers may an applicant turn down before being removed from the site-based waiting list?

4.	Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site based waiting list will not violate or be inconsistent with the order, agreement or complaint below:
d.	Site-Based Waiting Lists – Coming Year
	HA plans to operate one or more site-based waiting lists in the coming year, answer each of the following as; if not, skip to subsection (3) Assignment How many site-based waiting lists will the PHA operate in the coming year? Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists? Yes No: May families be on more than one list simultaneously If yes, how many lists? Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below)
(3) As	signment
a.	How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one) One Two Three or More
b. c.	Yes No: Is this policy consistent across all waiting list types? If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:
(4) Ac	lmissions Preferences
a.	Income targeting: Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
b.	Transfer policies: In what circumstances will transfers take precedence over new admissions? (list below)
4	Emergencies Over-housed Under-housed

ø	Medical justification
	Administrative reasons determined by the PHA (e.g., to permit modernization work)
	Resident choice: (state circumstances below)
	Other: (list below)
c.	Preferences
	1. Yes No: Has the PHA established preferences for admission to public housing (other than
	date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
2.	Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that
	apply from either former Federal preferences or other preferences)
For	rmer Federal preferences:
ø	Involuntary Displacement (Disaster, Government Action, Action of Housing
	Owner, Inaccessibility, Property Disposition)
	Victims of domestic violence
	Substandard housing
	Homelessness
	High rent burden (rent is > 50 percent of income)
Oth	ner preferences: (select below)
	Working families and those unable to work because of age or disability
	Veterans and veterans' families
	Residents who live and/or work in the jurisdiction
	Those enrolled currently in educational, training, or upward mobility programs
	Households that contribute to meeting income goals (broad range of incomes)
	Households that contribute to meeting income requirements (targeting)
	Those previously enrolled in educational, training, or upward mobility programs
	Victims of reprisals or hate crimes
	Other preference(s) (list below)
	3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that
	represents your first priority, a "2" in the box representing your second priority, and so on. If you give
	equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more
	than once, etc.
	2 Date and Time
	Former Federal preferences:
1	Involuntary Displacement (Disaster, Government Action, Action of Housing
	Owner, Inaccessibility, Property Disposition)
	Victims of domestic violence
	Substandard housing
	Homelessness
\vdash	High rent burden
Otl	ner preferences (select all that apply)
	Working families and those unable to work because of age or disability

	Those enrolled Households the Households the Those previous Victims of resolutions Other preference 4. Relationship The PHA app	o live and/or and currently in that contribute that contribute usly enrolled apprisals or hate nce(s) (list be pof preferences blies preferences the pool of	work in the jurisdiction educational, training, or upward to meeting income goals (broad to meeting income requirements in educational, training, or upward e crimes	range of incomes) s (targeting) rd mobility programs
(5) Oc	<u>cupancy</u>			
of o	The PHA's Admissions and (Continued) Occupancy policy			
	apply) At an annual reexamination and lease renewal Any time family composition changes At family request for revision Other (list)			
 (6) Deconcentration and Income Mixing a. Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question. b. Yes No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete. If yes, list these developments on the following table: 				
	Deconcentration Policy for Covered Developments			
Develop	oment Name	Number of Units	Explanation (if any) [see step 4 at §903.2©(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at $903.2\%(1)(v)$]

B. Section 8 Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates). (1) Eligibility
 a. What is the extent of screening conducted by the PHA? (select all that apply) Criminal or drug-related activity only to the extent required by law or regulation Criminal and drug-related activity, more extensively than required by law or regulation More general screening than criminal and drug-related activity (list factors): Other (list below)
 b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
 d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source) e. Indicate what kinds of information you share with prospective landlords? (select all that apply) Criminal or drug-related activity Other (describe below) History of, ability to, comply with material standard lease trms
(2) Waiting List Organization
 a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply) None Federal public housing Federal moderate rehabilitation Federal project-based certificate program Other federal or local program (list below)
 b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply) PHA main administrative office Other (list below) by mail application forms available at social services offices application forms available at apartments offices
a. Yes No: Does the PHA give extensions on standard 60-day period to search for a unit? If yes, state circumstances below:

- 4) If family has been seeking housing and has not been successful in finding housing
- 5) As reasonable accommodation to a person with disabilities

(4) Admissions Preferences

Program.

a.	Inco	ome targeting
	_	Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than of all new admissions to the section 8 program to families at or below 30% of median area income?
b.	Pref	ferences
	1.	Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
	2.	Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Fo	rm	er Federal preferences
4		Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
		Victims of domestic violence
		Substandard housing
		Homelessness
		High rent burden (rent is > 50 percent of income)
Oth	er pi	references (select all that apply)
		Working families and those unable to work because of age or disability
		Veterans and veterans' families
		Residents who live and/or work in your jurisdiction
		Those enrolled currently in educational, training, or upward mobility programs
		Households that contribute to meeting income goals (broad range of incomes)
		Households that contribute to meeting income requirements (targeting)
		Those previously enrolled in educational, training, or upward mobility programs
		Victims of reprisals or hate crimes
ø		Other preference(s) (list below)
•	1.	1 , , , ,
		is not elderly, disabled, or displaced.
	2.	Homeless persons going into Transitional Housing.
	3. 4.	Housing designated for Severely Mentally Ill persons which provides services for their illness on site. Homeownership - Families interested in participating in the Housing Authority's Homeownership

- 5. Participants in the Community Connections Tenant Based Assistance (TBA)
- 3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

2	Date and Time
Forme	r Federal preferences:
	Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Other pa	Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes
a. b. c.	Other preference(s) (list below) 1. Whose head or spouse or sole member is an elderly person or disabled person over a single person that ot elderly, disabled, or displaced. Homeless persons going into Transitional Housing. Housing designated for Severely Mentally Ill persons which provides services for their illness on site. Homeownership - Families interested in participating in the Housing Authority's Homeownership Program. Participants in the Community Connections Tenant Based Assistance (TBA)
	ong applicants on the waiting list with equal preference status, how are applicants ed? (select one) Date and time of application Drawing (lottery) or other random choice technique
	ne PHA plans to employ preferences for "residents who live and/or work in the sdiction" (select one) This preference has previously been reviewed and approved by HUD The PHA requests approval for this preference through this PHA Plan
6. Ø	Relationship of preferences to income targeting requirements: (select one) The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5)		Special Purpose Section 8 Assistance Programs
a.		which documents or other reference materials are the policies governing eligibility, selection, and admissions my special-purpose section 8 program administered by the PHA contained? (select all that apply) The Section 8 Administrative Plan Briefing sessions and written materials
		Other (list below)
b. ∲	Ноч	w does the PHA announce the availability of any special-purpose section 8 programs to the public? Through published notices Other (list below)
4.		IA Rent Determination Policies CFR Part 903.12(b), 903.7(d)]
A.		Public Housing Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.
(1)		Income Based Rent Policies Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.
		a. Use of discretionary policies: (select one of the following two)
		The PHA will <u>not employ</u> any discretionary rent-setting policies for income-based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
ø		The PHA <u>employs</u> discretionary policies for determining income-based rent (If selected, continue to question b.)
1.		b. Minimum Rent What amount best reflects the PHA's minimum rent? (select one) \$0\$ \$1-\$25\$ \$26-\$50
	2. 3.	Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? If yes to question 2, list these policies below: a. the maximum amount of time for a hardship exemption is six months.
		c. Rents set at less than 30% of adjusted income
		1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
		 If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

		the discretionary (optional) deductions and/or exclusions policies does the PHA
		nploy (select all that apply) ncome of a previously unemployed household member
H	For increases in	
H		other than general rent-setting policy)
☐ If y	,	d circumstances below:
☐ If y		other than general rent-setting policy) s and circumstances below:
	For household h	eads
	For other family	members
	For transportation	on expenses
	For the non-rein	nbursed medical expenses of non-disabled or non-elderly families
	Other (describe	below)
	e. Ceiling re	nts
	1. Do yo one)	u have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select
	Yes for all deve	opments
	Yes but only for	some developments
ø	No	
	2. For w	hich kinds of developments are ceiling rents in place? (select all that apply)
	Z. Por w	men kinds of developments are centing fems in place: (select an diat appry)
	For all developm	nents
	For all general of	ccupancy developments (not elderly or disabled or elderly only)
	For specified ge	neral occupancy developments
	For certain parts	of developments; e.g., the high-rise portion
	For certain size	units; e.g., larger bedroom sizes
	Other (list below	7)
	3. Select apply	the space or spaces that best describe how you arrive at ceiling rents (select all that
	Market compara	bility study
	Fair market rent	· · · ·
	95 th percentile re	ents
	75 percent of op	erating costs
	100 percent of o	perating costs for general occupancy (family) developments
	Operating costs	plus debt service
	The "rental valu	e" of the unit
	Other (list below	<i>i</i>)
	f. Rent re-d	eterminations:

		1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)
	1	Never
	! 	At family option
	! 	Any time the family experiences an income increase
A	l	
2		Any time a family experiences an income increase above a threshold amount or
	l	percentage: (if selected, specify threshold) \$200 per month
		Other (list below)
		g. Yes No: Does the PHA plan to implement individual savings accounts for residents as an alternative to the required 12 month disallowance of earned income and phasing in increases in the next year?
		(2) Flat Rents
		a. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)
ø		The section 8 rent reasonableness study of comparable housing
ø		Survey of rents listed in local newspaper
		Survey of similar unassisted units in the neighborhood
	j	Other (list/describe below)
	В.	Section 8 Tenant-Based Assistance Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).
	(1)	Payment Standards
		Describe the voucher payment standards and policies.
]	 a. What is the PHA's payment standard? (select the category that best describes your standard) At or above 90% but below100% of FMR 100% of FMR
ø		Above 100% but at or below 110% of FMR
		Above 110% of FMR (if HUD approved; describe circumstances below)
		b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)
		FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
		The PHA has chosen to serve additional families by lowering the payment standard
		Reflects market or submarket
		Other (list below)
		c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

ø	FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
\Box	Reflects market or submarket
	To increase housing options for families Other (list below)
d.]	How often are payment standards reevaluated for adequacy? (select one) Annually Other (list below)
3	 e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply) Success rates of assisted families Rent burdens of assisted families Other (list below)
	(2) Minimum Rent
	 a. What amount best reflects the PHA's minimum rent? (select one) \$0 \$1-\$25 \$26-\$50
	b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below A. the maximum amount of time for a hardship exemption is six months.
5.	Capital Improvement Needs [24 CFR Part 903.12(b), 903.7 (g)]
	Exemptions from Component 5: Section 8 only PHAs are not required to complete this component and may skip to Component 6.
A.	Capital Fund Activities
com	mptions from sub-component 5A: PHAs that will not participate in the Capital Fund Program may skip to ponent 5B. All other PHAs must complete 5A as instructed.
(1)	Capital Fund Program
	a. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 12 and 13 of this template (Capital Fund Program tables). If no, skip to B.
	b. Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

B. HOPE VI and Public Housing Development and Replacement Activities

(Non-Capital Fund)

Applicability of sub-component 5B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

(1) Hope VI Revitalization	(1)	Hope	VI	Revita	lizatior
----------------------------	------------	------	----	--------	----------

	a.	Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to next component; if yes, provide responses to questions on chart below for each grant, copying and completing as many times as necessary)
b.		Status of HOPE VI revitalization grant (complete one set of questions for
		each grant)
		Development name:
		Development (project) number:
		Status of grant: (select the statement that best describes the current status)
		Revitalization Plan under development
		Revitalization Plan submitted, pending approval
		Revitalization Plan approved
		Activities pursuant to an approved Revitalization Plan underway
	c.	Yes No: Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below:
	d.	Yes No: Will the PHA be engaging in any mixed-finance development activities for public
	u.	housing in the Plan year? If yes, list developments or activities below:
	e.	Yes No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:
		tion and Disposition R Part 903.12(b), 903.7 (h)]
Applica	bility	y of component 6: Section 8 only PHAs are not required to complete this section.
		4
a.		Yes 9 No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to
		tion 18 or 24 (Hope VI)of the U.S. Housing Act of 1937 (42 U.S.C. 1437p) or Section 202/Section 33 and and arong Conversion) in the plan Fiscal Year? (If "No", skip to component 7; if "yes", complete one
		vity description for each development on the following chart.)
		Demolition/Disposition Activity Description
	•	pment name:
		pment (project) number:
2. Acti	vity	type: Demolition
2 Ann	lianti	Disposition
s. App		ion status (select one) proved
		proved pmitted, pending approval
		nned application

4. Da	ate application app	proved, submitted, or planned for submission: (DD/MM/YY)
5. N	umber of units affo	ected:
	Coverage of action	
	Part of the develor	
	Total development	i e e e e e e e e e e e e e e e e e e e
7. T	imeline for activit	y:
		ojected start date of activity:
	 b. Projected er 	nd date of activity:
[24	CFR Part 903.12	ased Assistance—Section 8(y) Homeownership Program (b), $903.7(k)(1)(i)$
	Section 8(y) of to component; if "y program identifi	
(2) J	Program Descri _l	ption
	a. Size of Prog	orom
	Yes No:	Will the PHA limit the number of families participating in the Section 8 homeownership option?
		If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
	b. PHA establ	ished eligibility criteria
	Yes 🖢 No:	Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:
	c. What action	ns will the PHA undertake to implement the program this year (list)?
((3) Capacity of the	PHA to Administer a Section 8 Homeownership Program
ć	a.	ted its capacity to administer the program by (select all that apply): a minimum homeowner downpayment requirement of at least 3 percent of purchase price at at least 1 percent of the purchase price comes from the family's resources. at financing for purchase of a home under its Section 8 homeownership will be provided, anteed by the state or Federal government; comply with secondary mortgage market
(underwriting red	quirements; or comply with generally accepted private sector underwriting standards. vith a qualified agency or agencies to administer the program (list name(s) and years of
(ng that it has other relevant experience (list experience below). ed approval from local HUD office
	C ivil Rights Certifi [24 CFR Part 903.12	
	_	tions are included in the PHA Plan Certifications of Compliance with the PHA Plans and

Streamlined Five-Year/Annual Plans, which is submitted to the Field Office in hard copy—see Table of Contents.

9. Additional Information

[24 CFR Part 903.12 (b), 903.7 ®]

- A. PHA Progress in Meeting the Mission and Goals Described in the 5-Year Plan
 (Provide a statement of the PHA's progress against the goals and objectives established in the previous
 5-Year Plan for the period FY 2000 2004.
- B. Criteria for Substantial Deviations and Significant Amendments
 - (1) Amendment and Deviation Definitions

24 CFR Part 903.7®

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

- a. Substantial Deviation from the 5-Year Plan
- b. Significant Amendment or Modification to the Annual Plan

	[24 CF	Information R Part 903.13, 903.15] Int Advisory Board Recommendations
If y	Во	Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory pard/s?
	b. In	what manner did the PHA address those comments? (select all that apply) Considered comments, but determined that no changes to the PHA Plan were necessary.
		The PHA changed portions of the PHA Plan in response to comments List changes below:
(2)	☐ Reside	Other: (list below) ont Membership on PHA Governing Board
	The go PHA, u are fou a. Do	verning board of each PHA is required to have at least one member who is directly assisted by the inless the PHA meets certain exemption criteria. Regulations governing the resident board member at 24 CFR Part 964, Subpart E. best he PHA governing board include at least one member who is directly assisted by the PHA this ar?
	ø	Yes No:
	If	yes, complete the following:
	Na	ame of Resident Member of the PHA Governing Board: Beverly Mathena
	M	ethod of Selection:
	ø	Appointment

The term of appointment is (include the date term expires):

Election by Residents (if checked, complete next section—Description of Resident Election Process) **Description of Resident Election Process** Nomination of candidates for place on the ballot: (select all that apply) Candidates were nominated by resident and assisted family organizations Candidates could be nominated by any adult recipient of PHA assistance Self-nomination: Candidates registered with the PHA and requested a place on ballot Other: (describe) All Residents were notified and given an application. The Resident Advisory Board interviewed and selected a tenant commissioner Eligible candidates: (select one) Any recipient of PHA assistance Any head of household receiving PHA assistance Any adult recipient of PHA assistance Any adult member of a resident or assisted family organization Other (list) Eligible voters: (select all that apply) All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance) Representatives of all PHA resident and assisted family organizations Other (list) Resident Advisory Board b. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? The PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis The PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain): Date of next term expiration of a governing board member: Name and title of appointing official(s) for governing board (indicate appointing official for the next available position): (3) PHA Statement of Consistency with the Consolidated Plan [24 CFR Part 903.15] For each applicable Consolidated Plan, make the following statement (copy questions as many times as

Consolidated Plan jurisdiction: (provide name here)

necessary).

a. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply):

			The PHA has based its statement of needs of families on its waiting list on the needs expressed in the Consolidated Plan/s.
		ø	The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
		ø	The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
			Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
			Other: (list below)
			Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions nmitments: (describe below)
	(4)	(Reserv Use this	ed) section to provide any additional information requested by HUD.
10.		٠.	ed Voucher Program
a.	☐ If ye	Yes d 1 es, answe	No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? or the following questions.
b.			No: Are there circumstances indicating that the project basing of the units, rather than tenant-same amount of assistance is an appropriate option?
If y	es, cl	heck whic	ch circumstances apply:
		H	Low utilization rate for vouchers due to lack of suitable rental units
			Access to neighborhoods outside of high poverty areas Other (describe below:)
c.			number of units and general location of units (e.g. eligible census tracts or smaller areas within us tracts):

1. List of Supporting Documents Available for Review for Streamlined Five-Year/ Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Review									
Applicable	Related Plan Component									
&										
On Display										
3	PHA Certifications of Compliance with the PHA Plans and Related Regulations	Standard 5 Year and								
Ø	and Board Resolution to Accompany the Standard Annual, Standard Five-Year,	Annual Plans; streamlined								
	and Streamlined Five-Year/Annual Plans.	5 Year Plans								
•	State/Local Government Certification of Consistency with the Consolidated Plan.	5 Year Plans								
	Fair Housing Documentation Supporting Fair Housing Certifications: Records	5 Year and Annual Plans								
	reflecting that the PHA has examined its programs or proposed programs, identified									
	any impediments to fair housing choice in those programs, addressed or is									
	addressing those impediments in a reasonable fashion in view of the resources									
	available, and worked or is working with local jurisdictions to implement any of the									
	jurisdictions' initiatives to affirmatively further fair housing that require the PHA's									

	List of Supporting Documents Available for Review	
Applicable &	Supporting Document	Related Plan Component
On Display	involvement.	
d	mvorvement.	
	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
ø	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
•	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
•	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
ø	Public housing rent determination policies, including the method for setting public housing flat rents. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
ø	Schedule of flat rents offered at each public housing development. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
ø	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies.	Annual Plan: Rent Determination
4	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
9	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment). 96	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
	Consortium agreement(s).	Annual Plan: Agency Identification and Operations/ Management
ø	Public housing grievance procedures Check here if included in the public housing A & O Policy.	Annual Plan: Grievance Procedures
ø	Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
ø	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year. Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP	Annual Plan: Capital Needs Annual Plan: Capital
	grants. Approved HOPE VI applications or, if more recent, approved or submitted HOPE	Needs Annual Plan: Capital
	VI Revitalization Plans, or any other approved proposal for development of public housing.	Needs

	List of Supporting Documents Available for Review	
Applicable	Supporting Document	Related Plan Component
& O- Dil		
On Display	Self-evaluation, Needs Assessment and Transition Plan required by regulations	Annual Plan: Capital
ø	implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Needs
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
ø	Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership
ø	Public Housing Community Service Policy/Programs Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
ø	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
ø	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
e	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). Check here if included in the public housing A & O Policy.	Pet Policy
d	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Consortium agreement(s), if a consortium administers PHA programs.	Joint PHA Plan for Consortia
	Consortia Joint PHA Plans ONLY: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection	Joint PHA Plan for Consortia
	Other supporting documents (optional). List individually.	(Specify as needed)

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: NORHTEAST OREGON HOUSING AUTHORITY **NEOHA** Grant Type and Number 2005 Federal FY of Grant: Capital Fund Program Grant No: OR16PO32-501-05 Replacement Housing Factor Grant No: (X) Original Annual Statement Reserve for Disasters () Emergencies () Revised Annual Statement (revision no:) Performance and Evaluation Report for Period Ending: () Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost Original** Revised **Obligated** Expended Total non-CFP Funds \$0.00 1406 Operations \$76,237.50 \$0.00 \$0.00 1408 Management Improvements 1410 Administration \$0.00 \$0.00 \$0.00 \$46,960.50 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement \$0.00 \$0.00 \$22,015.00 \$0.00 1460 Dwelling Structures \$75,870.00 \$0.00 \$0.00 \$0.00 10 1465.1 Dwelling Equipment—Nonexpendable \$0.00 \$0.00 \$20,000.00 \$0.00 1470 Nondwelling Structures 12 13 1475 Nondwelling Equipment \$12,000.00 \$0.00 \$0.00 \$0.00 1485 Demolition 15 1490 Replacement Reserve 1492 Moving to Work Demonstration 16 1495.1 Relocation Costs 18 1499 Development Activities

Capital Fund Program Tables Page 1

1501 Collaterization or Debt Service

1502 Contingency

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Annua	Statement/Performance and Evaluation Repo	ort			
Capital	l Fund Program and Capital Fund Program R	eplacement Hous	sing Factor (CFP/CFPRH	(F) Part I: Summary
PHA Name	:: NORTHEAST OREGON HOUSING AUTHORITY	Grant Type and Number			Federal FY of Grant: 2005
		2-501-05			
		Replacement Housing Fact	tor Grant No:		
(X) Orig	ginal Annual Statement Reserve for Disasters () Emerg	gencies Revised Annu	al Statement	() Revised An	nnual Statement (revision no:)
()Perfor	mance and Evaluation Report for Period Ending: ()	Final Performance a	nd Evaluation l	Report	
Line No.	Summary by Development Account	Total Estimat	ed Cost		Total Actual Cost
		Original	Revised	Obligated	Expended
21	Amount of Annual Grant: (sum of lines 2-20)	\$253,083.00	\$0.00	\$0.00	\$0.00
22	Amount of line 21 Related to LBP Activities				
23	Amountof line 21 Section 504 Compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security Hard Cost				
26	Amount of line 21 Related to Energy conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: No Authority	Grant Typ	e and Numl	ber		Federal FY of C	Grant: 2005		
				Grant No:OR16PC Factor Grant No:	32-501-05			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estim	aated Cost	Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406		\$76,237.50	\$0.00	\$0.00	\$0.00	
	Administration	1410						
	Salary & Benefits			\$46,960.50	\$0.00	\$0.00	\$0.00	
	Total: HA WIDE.			\$123,198.00	\$0.00	\$0.00	\$0.00	
OR32-1	Site Improvements	1450						
	Concrete Replacement Haines, Baker Family		2,000sf	\$15,000.00	\$0.00	\$0.00	\$0.00	
	Repair Parking Lot LG or BC			\$7,015.00	\$0.00	\$0.00	\$0.00	
	Sub Total 1450			\$22,015.00	\$0.00	\$0.00	\$0.00	
OR32-1	Dwelling Structures	1460						
3102 1	Replace cabinet doors, drawers and guides in 8PH Baker, Union Family, 8 in Haines family	1100	16	\$43,935.00	\$0.00	\$0.00	\$0.00	
	Paint Units		8	\$5,935.00	\$0.00	\$0.00	\$0.00	
	Redo Vents Elderly			\$16,000.00	\$0.00	\$0.00	\$0.00	
	Tile Family Units		4	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Sub Total 1460			\$75,870.00	\$0.00	\$0.00	\$0.00	
OR32-1	Nondwelling Equipment	1475						
	Replace 2 Lawn Mowers LG & Baker		2	\$12,000.00	\$0.00	\$0.00	\$0.00	
	TOTAL OR32-1			\$109,885.00	\$0.00	\$0.00	\$0.00	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Nort	heast Oregon Housing Authority	Grant Ty	pe and Nun	nber		Federal FY of Grant: 2005		
		Capital F	und Progran	n Grant No: OR161	PO32-501-05			
				g Factor Grant No:				
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
Name/HA-Wide Activities								
				Original	Revised	Funds Obligated	l Funds Expended	
							1	
OR32-4	Dwelling Equipment	1465.1						
	AC units in Grant Co. Canyon City	,	6	\$20,000.00	\$0.00	\$0.00	\$0.00	
	TOTAL OR32-4			\$20,000.00	\$0.00	\$0.00	\$0.00	
	TOTAL GRANT AMOUNT			\$253,083.00	\$0.00	\$0.00	\$0.00	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Supporting Pages

Grant Type and Nu	ımber					Federal FY of Grant: 2005
0 4 15 15						
Capital Fund Program Grant No: OR16PO32-501-05						
Replacement Housing Factor Grant No:						
					All Funds Obligated (Quarter Ending Date)	
Original	Revised	Actual	Original	Revised		
01/31/07			07/31/07			
01/31/07			07/31/07			
OR32-7 01/31/07			07/31/07			
	Replacement F	Replacement Housing Factor (All Funds Obligate (Quarter Ending Date of the Company of the Comp	Replacement Housing Factor Grant No: All Funds Obligated (Quarter Ending Date) Original Revised Actual 01/31/07 01/31/07	Replacement Housing Factor Grant No: All Funds Obligated (Quarter Ending Date) Original Revised Actual Original 01/31/07 07/31/07 01/31/07 07/31/07	Replacement Housing Factor Grant No: All Funds Obligated (Quarter Ending Date) Original Revised Actual Original Revised 01/31/07 07/31/07 01/31/07 07/31/07	Replacement Housing Factor Grant No: All Funds Obligated (Quarter Ending Date) Original Revised Actual Original Revised Actual 01/31/07 07/31/07 01/31/07 07/31/07

Capital Fund Tables Page 4

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: NORHTEAST OREGON HOUSING AUTHORITY **Grant Type and Number** Federal FY of Grant: **NEOHA** 2004 Capital Fund Program Grant No: OR16PO32-501-04 Replacement Housing Factor Grant No:) Original Annual Statement Reserve for Disasters () Emergencies (X) Revised Annual Statement (revision no: 2) (X)Performance and Evaluation Report for Period Ending: 9/30/04 () Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost** Line No. **Original** Revised **Obligated** Expended Total non-CFP Funds 1406 Operations \$90,102.00 \$0.00 \$0.00 \$44,875.50 1408 Management Improvements 1410 Administration \$0.00 \$45,226.50 \$0.00 \$0.00 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement \$71,748.00 \$0.00 \$0.00 \$0.00 1460 Dwelling Structures \$91,233.00 \$0.00 \$0.00 \$0.00 1465.1 Dwelling Equipment—Nonexpendable 1470 Nondwelling Structures 12 1475 Nondwelling Equipment 1485 Demolition 1490 Replacement Reserve 1492 Moving to Work Demonstration 1495.1 Relocation Costs 1499 Development Activities 1501 Collaterization or Debt Service

Capital Fund Program Tables Page 1

1502 Contingency

Annua	Statement/Performance and Evaluation Report					
Capital	l Fund Program and Capital Fund Program Repl	acement Housing Fa	actor (CFP/CFP)	RHF) Part I:	Summary	
PHA Name	:: NORTHEAST OREGON HOUSING AUTHORITY	Grant Type and Number		Federal FY of Grant: 2004		
		Capital Fund Program Grant I	No: OR16PO32-501-04	4		
		Replacement Housing Factor	Grant No:			
. , .		sed Annual Statement () nal Performance and Evalua	X) Revised Annual Station Report	atement (revision n	o: 2)	
Line No.	Summary by Development Account	Total Estimat	ted Cost	Total A	otal Actual Cost	
		Original	Revised	Obligated	Expended	
21	Amount of Annual Grant: (sum of lines 2-20)	\$253,083.00	\$0.00	\$0.00	\$0.00	
22	Amount of line 21 Related to LBP Activities					
23	Amountof line 21 Section 504 Compliance					
24	Amount of line 21 Related to Security - Soft Costs					
25	Amount of line 21 Related to Security Hard Cost					
26	Amount of line 21 Related to Energy conservation Measures					

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: No Authority	HA Name: Northeast Oregon Housing		e and Nun	ıber		Federal FY of Grant: 2004				
<u>, </u>				Grant No:OR16						
	Development General Description of Major Number Work Categories		placement Housing Factor Grant No: Dev. Quantity Total Estimated Cost		Total Actual Cost		Status of Work			
Name/HA- Wide Activities	work categories	Acct No.								
				Original	Revised	Funds Obligated	Funds Expended			
HA-Wide	Operations	1406		\$90,102.00	\$44,875.50	\$0.00	\$0.00			
	Administration	1410								
	Salary & Benefits				\$45,226.50	\$0.00	\$0.00			
	Total: HA WIDE.			\$90,102.00	\$90,102.00	\$0.00	\$0.00			
OR32-1	Site Improvements	1450								
	Concrete Replacement Baker Family		1,500 sq ft	\$10,000.00	\$10,000.00	\$0.00	\$0.00			
	Install Playground equip. in Baker and Elgin family		3	\$34,548.00	\$34,548.00	\$0.00	\$0.00			
	Sub Total 1450			\$44,548.00	\$44,548.00	\$0.00	\$0.00			
OR32-1	Dwelling Structures	1460								
	Paint Units, La Grande, Baker Elderly		15	\$10,000.00	\$10,000.00	\$0.00	\$0.00			
	Re- Roof PH			\$70,000.00	\$70,000.00	\$0.00	\$0.00			
	Tile Family Units- Baker Family		4	\$11,233.00	\$11,233.00	\$0.00	\$0.00			
	Sub Total 1460			\$91,233.00	\$91,233.00	\$0.00	\$0.00			
	TOTAL OR32-1			\$135,781.00	\$135,781.00	\$0.00	\$0.00			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Nort	theast Oregon Housing Authority	Grant T	ype and Nu	mber		Federal FY of	Grant: 2004	
		Capital	Fund Progra	m Grant No: OR16	PO32-501-04			
		Replace	ment Housin	g Factor Grant No:				
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	Total Estimated Cost		ctual Cost	Status of Work
Name/HA-Wide Activities								
				Original	Revised	Funds Obligated	Funds Expended	
OR32-7	Site Improvements	1450						
	Retaining Wall Huntington		4	\$27,200.00	\$27,200.00	\$0.00	\$0.00	
	TOTAL OR32-7			\$27,200.00	\$27,200.00	\$0.00	\$0.00	
	TOTAL GRANT AMOUNT			\$253,083.00	\$253,083.00	\$0.00	\$0.00	

Capital Funds Tables Page 3B

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Supporting Pages

artin. Supporting	1 ages						
PHA Name: Northeast	Grant Type and Nu	ımber					Federal FY of Grant: 2004
Dregon Housing Authority							
	_	Program Grant					
	Replacement H	Iousing Factor (
Development Number	All	Funds Obligat	ed	A	ll Funds Expended		Reasons for
Name Name/ HA-Wide Activities		arter Ending Da			uarter Ending Date		Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	01/31/06			07/31/06			
OR32-1	01/31/06			07/31/06			
OR32-7	01/31/06			07/31/06			

Capital Fund Tables Page 4

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary Grant Type and Number PHA Name: NORHTEAST OREGON HOUSING AUTHORITY NEOHA Federal FY of Grant: 2003 Capital Fund Program Grant No: OR16PO32-502-03 Replacement Housing Factor Grant No:) Original Annual Statement Reserve for Disasters () Emergencies (X) Revised Annual Statement (revision no: 1) (X) Performance and Evaluation Report for Period Ending: 9/30/04 () Final Performance and Evaluation Report **Summary by Development Account** Line No. **Total Estimated Cost Total Actual Cost** Original Revised **Obligated** Expended Total non-CFP Funds 1406 Operations \$6.559.95 \$24,552.00 \$24,063.45 \$24,063.45 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement \$19,000.00 \$19,488.55 \$19,488.55 \$13,988.55 1460 Dwelling Structures \$0.00 \$0.00 \$0.00 \$0.00 1465.1 Dwelling Equipment—Nonexpendable 1470 Nondwelling Structures 1475 Nondwelling Equipment \$0.00 \$0.00 \$0.00 \$0.00 1485 Demolition 1490 Replacement Reserve 1492 Moving to Work Demonstration 1495.1 Relocation Costs 1499 Development Activities 1501 Collaterization or Debt Service

Capital Fund Program Tables Page 1

1502 Contingency

Annual	Statement/Performance and Evaluation Report	t							
Capital	Fund Program and Capital Fund Program Rep	olacement Housing	g Factor (CFP/C	CFPRHF) Part	I: Summary				
PHA Name	: NORTHEAST OREGON HOUSING AUTHORITY	Grant Type and Numbe	Grant Type and Number						
		Capital Fund Program G	Grant No: OR16PO32-	502-03					
		Replacement Housing F	actor Grant No:						
` '	`	ncies Revised Annual St	` '		tement (revision no: 1)				
(X)Perf	ormance and Evaluation Report for Period Ending:9/30/04	() Final Performance	e and Evaluation Re	eport					
Line No.	Summary by Development Account	Total Estir	nated Cost	Tota	al Actual Cost				
		Original	Revised	Obligated	Expended				
21	Amount of Annual Grant: (sum of lines 2-20)	\$43,552.00	\$43,552.00	\$43,552.00	\$20,548.50				
22	Amount of line 21 Related to LBP Activities								
23	Amount of line 21 Section 504 Compliance								
24	Amount of line 21 Related to Security - Soft Costs								
25	Amount of line 21 Related to Security Hard Cost								
26	Amount of line 21 Related to Energy conservation Measures								

Capital Fund Program Tables Page 2

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: No	rtheast Oregon Housing Authority	Grant Type a	and Number			Federal FY of Grant: 2003			
		Capital Fund	Program Gran	t No:OR16PO32-502	2-03				
		Replacement	Housing Facto	or Grant No:					
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estim	ated Cost	Total Actual Cost		Status of Work	
Name/HA- Wide Activities									
				Original	Revised	Funds Obligated	Funds Expended		
HA-Wide	Operations	1406		\$24,552.00	\$24,063.45	\$24,063.45	\$6,559.95		
HA Wide	Non- Dwelling Equipment	1475							
	Total: HA WIDE.			\$24,552.00	\$24,063.45	\$24,063.45	\$6,559.95		
OR32-1	Site Improvements	1450							
	Concrete Replacement Elgin		1500 sf	\$4,000.00	\$0.00	\$0.00	\$0.00	Project Deleted	
	Sub Total 1450			\$4,000.00	\$0.00	\$0.00	\$0.00		
OR32-1	Dwelling Structures	1460							
				\$0.00	\$0.00	\$0.00	\$0.00		
				\$0.00	\$0.00	\$0.00	\$0.00		
				\$0.00	\$0.00	\$0.00	\$0.00		
				\$0.00	\$0.00	\$0.00	\$0.00		
				\$0.00	\$0.00	\$0.00	\$0.00		
	Sub Total 1460			\$0.00	\$0.00	\$0.00	\$0.00		
	TOTAL OR32-1			\$4,000.00	\$0.00	\$0.00	\$0.00		

Capital Funds Tables Page 3A

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: North	Grant Typ	e and Number			Federal FY of Grant: 2003			
		Capital Fu	nd Program Gra	ant No: OR16PO32-	502-03			
		Replaceme	nt Housing Fac	tor Grant No:				
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Ac	tual Cost	Status of Work
Name/HA-Wide Activities								
				Original	Revised	Funds Obligated	Funds Expended	
OR32-4	Site Improvements	1450						
	Install playground Equipment		1	\$15,000.00	\$19,488.55	\$19,488.55	\$13,988.55	Contracted
	TOTAL OR32-4			\$15,000.00	\$19,488.55	\$19,488.55	\$13,988.55	
	TOTAL GRANT AMOUNT			\$43,552.00	\$43,552.00	\$26,048.50	\$20,548.50	

Capital Funds Tables Page 3B

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Supporting Pages

PHA Name: Northeast Oregon Housing Authority	Grant Type and No	umber					Federal FY of Grant: 2003
oregon Housing Authority		Program Gran	t No: OR16PO3	32-502-03			
	Replacement H	_					
Development Number Name Name/ HA-Wide Activities		Funds Obligater Funds Obligater Ending D		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	01/31/05		09/30/04	07/31/05			
OR32-1	01/31/05			07/31/05			Project Deleted
OR32-4	01/31/05		09/07/04	07/31/05			

Capital Fund Tables Page 4

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: NORHTEAST OREGON HOUSING AUTHORITY NEOHA Grant Type and Number Federal FY of Grant: 2003 Capital Fund Program Grant No: OR16PO32-501-03 Replacement Housing Factor Grant No:) Original Annual Statement Reserve for Disasters () Emergencies (X) Revised Annual Statement (revision no: 3) (X) Performance and Evaluation Report for Period Ending: 9/30/04 () Final Performance and Evaluation Report Line No. **Summary by Development Account Total Estimated Cost Total Actual Cost Obligated Expended Original** Revised Total non-CFP Funds 1406 Operations \$88,021.00 \$105,930.42 \$97,395.42 \$53,168.53 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement \$20,716.00 \$12,549.00 \$12,549.00 \$7,009.00 1460 Dwelling Structures \$79,134.00 \$82,107.00 \$82,107.00 \$82,107.00 1465.1 Dwelling Equipment—Nonexpendable

Capital Fund Program Tables Page 1

\$30,664.00

\$17,948.58

\$17.887.58

\$17,948.58

1470 Nondwelling Structures
1475 Nondwelling Equipment

1490 Replacement Reserve

1495.1 Relocation Costs
1499 Development Activities

1492 Moving to Work Demonstration

1501 Collaterization or Debt Service

1485 Demolition

1502 Contingency

16

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: NORTHEAST OREGON HOUSING AUTHORITY Grant Type and Number Federal FY of Grant: 2003 Capital Fund Program Grant No: OR16PO32-501-03 Replacement Housing Factor Grant No:) Original Annual Statement Reserve for Disasters () Emergencies Revised Annual Statement () Revised Annual Statement (revision no:) X)Performance and Evaluation Report for Period Ending: 9/30/04 () Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost** Line No. **Original Obligated Expended** Revised Amount of Annual Grant: (sum of lines 2-20) \$218,535.00 \$218,535.00 \$210,000.00 \$160,172.11 Amount of line 21 Related to LBP Activities Amount of line 21 Section 504 Compliance Amount of line 21 Related to Security - Soft Costs 25 Amount of line 21 Related to Security Hard Cost Amount of line 21 Related to Energy conservation Measures

Capital Fund Program Tables Page 2

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: No	rtheast Oregon Housing Authority		and Numbe			Federal FY of Gran	t: 2003	
		Capital Fund	d Program G	ant No:OR16PO3	2-501-03			
		Replacemen	nt Housing Fa	actor Grant No:				
Development Number	er Categories No.		Total A	ctual Cost	Status of Work			
Name/HA- Wide Activities								
				Original	Revised	Funds Obligated	Funds Expended	
HA-Wide	Operations	1406		\$88,021.00	\$105,930.42	\$97,395.42	\$53,168.53	
HA Wide	Non- Dwelling Equipment	1475						
TIT TYTE	Replace Maintenance vehicle	11,70	1	\$30,664.00	\$17,948.58	\$17,948.58	\$17,887.58	Completed
	Total: HA WIDE.			\$118,685.00	\$123,879.00	\$115,344.00	\$71,056.11	
				. ,	,	, ,	. ,	
OR32-1	Site Improvements	1450						
	Concrete replacement Elgin		1500 sf	\$6,516.00	\$5,540.00	\$5,540.00	\$0.00	Completed
	Repair Parking Lot Baker Elderly		30,000 sf	\$14,200.00	\$14,200.00	\$7,009.00	\$7,009.00	Completed
	Sub Total 1450			\$20,716.00	\$12,549.00	\$12,549.00	\$7,009.00	
OR32-1	Dwelling Structures	1460						
	Replace OH Lights La Grande / Baker Elderly		92	\$25,000.00	\$15,675.20	\$15,675.20	\$15,675.20	Completed
	Replace Tile (VCT) Family Units		15	\$39,134.00	\$45,181.80	\$45,181.80	\$45,181.80	Completed
	Replace Kit Cabinet Doors		4	\$0.00	\$0.00	\$0.00	\$0.00	
	Replace Vertical Blinds Union/ Baker		140	\$15,000.00	\$21,250.00	\$21,250.00	\$21,250.00	Completed
	Install back door and patios elderly		6	\$0.00	\$0.00	\$0.00	\$0.00	•
	Sub Total 1460			\$79,134.00	\$82,107.00	\$82,107.00	\$82,107.00	
	TOTAL OR32-1			\$99,850.00	\$94,656.00	\$94,656.00	\$89,116.00	

Capital Funds Tables Page 3A

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: North	HA Name: Northeast Oregon Housing Authority			er		Federal FY of Grant: 2003			
		Capital Fu	nd Program (Grant No: OR16PO3	32-501-03				
		Replaceme	ent Housing F	Factor Grant No:					
Development Number	General Description of Major Work Categories	Dev. Acct No.			Total Actual Cost		Status of Work		
Name/HA-Wide Activities									
				Original	Revised	Funds Obligated	Funds Expended		
OR32-4	Site Improvements	1475							
	Install Playground equipment		1	\$0.00	\$0.00	\$0.00	\$0.00		
	TOTAL OR32-4			\$0.00	\$0.00	\$0.00	\$0.00		
	TOTAL GRANT AMOUNT			\$218,535.00	\$218,535.00	\$210,000.00	\$160,172.11		

Capital Funds Tables Page 3B

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Supporting Pages

art III. Supporting						•	
PHA Name: Northeast	Grant Type and N	umber					Federal FY of Grant: 2003
Dregon Housing Authority	7						
	Capital Fund	Program Gra	int No: OR16	PO32-501-03			
	Replacement 1	Housing Fact	or Grant No:				
Development Number	All F	unds Obligat	ted	All	Funds Expende	e d	Reasons for
Name Name/ HA-Wide Activities		ter Ending D			arter Ending Da	Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	01/31/05			07/31/05			
OR32-1	01/31/05			07/31/05			
OR32-4	01/31/05			07/31/05			

Capital Fund Tables Page 4

Capital Fund Program Five Year Action Plan Part I: Summary PH Name: Northeast Oregon (X)Original 5-Year Plan **Housing Authority** () Revision No:3 **Development Number/ Year 1 2005** Work Statement for Year 4 Work Statement Work Statement for Year 2 Work Statement for Year 3 Name/ HA-Wide for Year 5 FFY Grant: 2006 FFY Grant: 2007 FFY Grant: 2008 FFY Grant: 2009 PHA FY: 2007 PHA FY: 2009 PHA FY: 2010 PHA FY: 2008 Annual Statement OR32-1 \$76,935.00 \$80,000.00 \$96,365.00 \$70,813.00 HA Wide \$162,800.00 \$173,083.00 \$156,718.00 \$164,770.00 OR32-2 OR32-3 OR32-4 OR32-7 \$13,348.00 \$17,500.00 CFP Funds Listed for 5 -\$253,083.00 \$253,083.00 \$253,083.00 \$253,083.00 Year Planning Replacement Housing Factor Funds

Capital Fund Program Five Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for	Activities for Year: 2	Activities for Year: 3
year 1	FFY Grant: 2006	FFY Grant: 2007
	PHA FY: 2007	PHA FY: 2008

	FIIA I 1. 2007			FIIA 1 1. 2000		
	Devopment Name/ Number	Major Work Categories	Estimated Cost	Development Name/ Number	Major Work Categories	Estimated Cost
See	OR32-1	Replace Cabinet doors and guides family units	\$6,000.00	OR32-1	Replace 2,600 sf concrete LG, Baker elderly	\$20,000.00
		Concrete Replacement	\$20,000.00		Paint Units Elderly Baker and Union Co.	\$20,000.00
		Replace Office carpet, La Grande	\$10,935.00		Seal Block veneer	\$15,000.00
Annual		Paint Units Elderly Baker and Union Co.	\$20,000.00		Tile Family Units	\$5,000.00
		Maintenance Vehicle	\$20,000.00			
	OR32-2					
Statement	OR32-7	Water Heaters and Disposals	\$13,348.00			
	HA Wide	Operations	\$162,800.00	HA Wide	Operations	\$173,083.00
		operation.	ψ10 <u>2</u> ,000.00		Replace Maintenance Vehicle	\$20,000.00
Estir	nated cost	Total CFP	\$253,083.00			\$253,083.00

Capital Fund Program Five Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for		Activities for Year: 4		Activities for Year: 5		
year 1	FFY Grant: 2008		FFY Grant: 2009			
	PHA FY: 2009		PHA FY: 2010			
	Development Name/ Number	Major Work Categories	Estimated Cost	Development Name/ Number	Major Work Categories	Estimated Cost
See	OR32-1	20 La Grande Elderly Tub surrounds	\$12,935.00	OR32-1	20 Baker Elderly tub surrounds	\$10,000.00
		Repair Parking Lot	\$20,000.00		Replace Back Office Carpet	\$12,000.00
Annual		Concrete replacement Union / Baker Family	\$15,382.00		Counter Tops Replace	\$23,813.00
		Air Tank low flow Toilets	\$48,048.00	OR32-2	Replace concrete 2000sf	\$25,000.00
Statement				OR32-3	Replace 5 Water Heaters	\$4,500.00
				OR32-04	Replace 12 Water Heaters	\$13,000.00
	HA Wide	Operations	\$156,718.00	HA Wide	Operations	\$164,770.00
Esti	mated cost	Total CFP	\$253,083.00			\$253,083.00

Attachment V

Section 8 Homeownership Program Capacity Statement

Northeast Oregon Housing Authority has the capacity to operate a Homeownership Program.

Northeast Oregon Housing Authority has been operating a Homeownership Rent to Own Program since January 26, 1996. Northeast Oregon Housing Authority received an Opportunity Purchase Program grant to purchase ten (10) lots and install manufactured homes on the sites.

The families have 5 years to improve their income through NEOHA's Family Self Sufficiency Program and purchase the homes.

The families use their Section 8 assistance to rent the homes. Of the six homes that were occupied in 1996, one (1) has already purchased the home and one (1) is in the process. The other four units have families that left the units and have new participants.

Northeast Oregon Housing Authority developed the Section 8 Homeownership Program off the proposed regulations and have had one family who has purchased their home. Upon approval to implement the program NEOHA will market the program to Voucher Holders and NEOHA's current Homeownership tenants.

Attachment VI

Progress Made In Meeting Missions and Goals

- Received funding through the State to purchase and rehab a HUD 221 (d) 3 Project in Enterprise, Oregon.
- Two families purchased their Rent To Own Homeownership Units in the last year, and two Section 8 Voucher Homeownership, with six in the process of purchasing.
- Staff attended training on Reasonable Accommodations.
- Provide accessible housing to a large family living in Baker County who cannot find an accessible unit.
- Housing Choice Voucher Program SEMAP score is 100%.

Attachment VII

List of Resident Advisory Board

NAME	PROGRAM	CITY	
Teresa Duffy	Section 8	La Grande, Oregon	
Dee (Slim) Olsen	Section 8	Baker City, Oregon	
Jeff Corum	Section 8	La Grande, Oregon	
Ed Klimchock	Section 8	La Grande, Oregon	
Traci Murry	Section 8	La Grande, Oregon	
Beverly Mathena, Tenant Commissioner	Section 8	Elgin, Oregon	
Joseph Scott	Public Housing	La Grande, Oregon	

Attachment VIII

NORTHEAST OREGON HOUSING AUTHORITY

PUBLIC HOUSING

DECONCENTRATION POLICY

It is the Northeast Oregon Housing Authority's policy to provide for deconcentration of poverty and encourage

income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward this end, families will be skipped on the waiting list to reach other families with a lower or higher income. The selection will be accomplished in a uniform and non-discrimination manner.

The Northeast Oregon Housing Authority staff will affirmatively market it's Public Housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, Northeast Oregon Housing Authority staff will analyze the income levels of families residing in each of the developments, the income levels of census tracts in which the developments are located, and the income levels of the families on the waiting list. Based on this analysis, Northeast Oregon Housing Authority staff will determine the level of marketing strategies and deconcentration incentive to implement.

The Northeast Oregon Housing Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals of a particular development.

Various incentives may be used at different times, under different conditions, but will always be provided in a consistent and nondiscriminatory manner.

Approved by the Board of Commissioners Resolution # 240 November 10, 1999

Attachment IX

NORTHEAST OREGON HOUSING AUTHORITY

AGENCY PLAN AMENDMENT OR MODIFICATION POLICY

Listed below are the criteria Northeast Oregon Housing Authority will use to determine when to amend or modify the Agency Plan.

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1) Any changes in goals and objectives that are not to address specific local emergencies or changes required for reasonable accommodations.

Significant Amendment or Modification:

- 2) Changes to rent or admissions policies or organization of the waiting list.
- 3) Additions of non-emergency work items, or change in use of replacement reserves fund under the Capital Fund in excess of \$20,000.
- 4) Any changes with regard to demolition or disposition, designation, homeownership programs, or conversion activities.

Approved by the NEOHA Board of Commissioners May 22, 2001 Resolution # 265

ATTACHMENT X

VOLUNTARY CONVERSION

PHA Plan - Desk Guide questions regarding Voluntary Conversion

a) How Many of the PHA's developments are subject to the Required Initial Assessment?

ALL OF THE HOUSING AUTHORITY FIVE DEVELOPMENTS ARE SUBJECT TO THE INITIAL ASSESSMENT.

b) How many of the PHA's developments are not subject to Required Initial Assessments based on exemptions.

NONE OF THE DEVELOPMENTS ARE NOT SUBJECT TO INITIAL ASSESSMENT.

c) How many Assessments were conducted for the PHA's covered developments?

AN ASSESSMENT WAS DONE FOR ALL FIVE DEVELOPMENTS AS ONE DEVELOPMENT BECAUSE OUR SMALL DEVELOPMENTS OF DAYVILLE (5 UNITS), MT. VERNON (8 UNITS), CANYON CITY (12 UNITS), AND HUNTINGTON (12 UNITS) DO NOT HAVE SEPARATE ACCOUNTING RECORDS. WE COULD NOT BREAK OUT THE EXPENSES FOR THE SMALL DEVELOPMENTS.

d) Identify PHA development that may be appropriate for conversion based on the Required Initial Assessments:

NONE OF THE DEVELOPMENTS WERE IDENTIFIED AS APPROPRIATE FOR CONVERSION.

e) If the PHA has not completed the Required Initial Assessments, describe the status of these assessments.

THE ASSESSMENT HAS BEEN COMPLETED.

ATTACHMENT XI

RESIDENT SURVEY FOLLOW-UP PLAN			
A Resident Survey Follow-up Plan was not required for FY 2004.			